TITLE V BLOCK GRANT APPLICATION FORMS (2-21)

STATE: NE
APPLICATION YEAR: 2011

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Fe	ORM 2			
MCH BUDGET D		Y 2011		
	l) and 505(a)(3)(4)] ATE: NE			
1. FEDERAL ALLOCATION				
(Item 15a of the Application Face Sheet [SF 424]) Of the Federal Allocation (1 above), the amount earmarked for:			\$	4,024,332
A.Preventive and primary care for children:				
\$ 1,211,889 (30.11%)				
B.Children with special health care needs: \$ 1,209,615 (30.06%)				
(If either A or B is less than 30%, a waiver request must accompany the a	application)[Sec. 50	5(a)(3)]		
C.Title V admininstrative costs:				
\$164,284 (4.08 %) (The above figure cannot be more than 10%)[Sec. 504(d)]				
2. UNOBLIGATED BALANCE (Item 15b of SF 424)			\$	0
3. STATE MCH FUNDS (Item 15c of the SF 424)			\$	2,933,000
4. LOCAL MCH FUNDS (Item 15d of SF 424)			\$	482,266
5. OTHER FUNDS (Item 15e of SF 424)			\$	0
6. PROGRAM INCOME (Item 15f of SF 424)			•	0
,			Ψ	
7. TOTAL STATE MATCH (Lines 3 through 6) (Below is your State's FY 1989 Maintainence of Effort Amount)			\$	3,415,266
\$ 2,626,360				
8. FEDERAL-STATE TITLE V BLOCK GRANT (Total lines 1 through 6. Same as line 15g of SF 424)	PARTNERS	HIP (SUBTOTAL)	\$	7,439,598
9. OTHER FEDERAL FUNDS (Funds under the control of the person responsible for the administration of	the Title \/ program			
a. SPRANS:	e true v program,	0		
b. SSDI:	Φ	99,954		
c. CISS:	φ <u></u>	00,004		
d. Abstinence Education:	\$ \$			
e. Healthy Start:	\$	0		
f. EMSC:	\$	0		
g. WIC:	\$	34,195,833		
h. AIDS:	\$	0		
i. CDC:	\$	8,143,638		
j. Education:	\$	0		
k. Other:	*			
		04.045		
see note	\$	94,015,598		
	\$ <u></u>			
10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under	item 9)		\$	136,673,763
11. STATE MCH BUDGET TOTAL (Partnership subtotal + Other Federal MCH Funds subtotal)			\$	144,113,361

FORM NOTES FOR FORM 2

FIELD LEVEL NOTES

1. Section Number: Form2_Main

Field Name: WIC

Row Name: Other Federal Funds - WIC

Column Name: Year: 2011 Field Note:

WIC - nutrition services administratiion ---- \$10,595,061 WIC- food-----\$23,016,474 WIC - breastfeeding (peer counseling)-----\$ 401,598 WIC- ARRA------\$ 187,700

Total \$34,195,833

Section Number: Form2_Main Field Name: OtherFedFundsOtherFund Row Name: Other Federal Funds - Other Funds

Row Name: Other Federal Funds - Other F Column Name: Year: 2011 Field Note: TANF - \$249, 873 Newborn Hearnung Screening - \$337,000 Title X Family Planning -\$2,502,704 State Early Childhood Systems - \$132,000 Healthy Weights/Behaviors - \$146,000 CSFP - \$901,443 Farly Intervention Medicaid in Schools - \$4.

Early Intervention Medicaid in Schools - \$4,016,000 Medicaid Schools Outreach - \$32,795,000

Medicaid Aged and Disabled Waiver - \$42,739,537

SSBG - \$9,946,041 HRSA PREP - \$250,000 TOTAL \$94,015,598

STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

STATE: NE

	FY 2	2006	FY 2	2007	FY 2	2008
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$4,167,938	\$3,723,310	\$4,114,265	\$3,442,895	\$4,059,128	\$4,158,744
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
3. State Funds (Line3, Form 2)	\$	\$ 2,978,954	\$ 2,632,355	\$3,276,104	\$ 2,753,355	\$2,735,262
4. Local MCH Funds (Line4, Form 2)	\$	\$ 984,922	\$1,047,604	\$955,764	\$986,075	\$946,833
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
7. Subtotal	\$7,303,859	\$7,687,186	\$	\$	\$	\$
		(THE FEI	DERAL-STATE TITLE E	BLOCK GRANT PARTN	NERSHIP)	
8. Other Federal Funds (Line10, Form 2)	\$	\$0	\$ 97,764,430	\$0	\$ 113,020,059	\$0
9. Total (Line11, Form 2)	\$85,270,159	\$	\$105,558,654	\$	\$120,818,617	\$7,840,839
			(STATE MCH B	UDGET TOTAL)		

STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

STATE: NE

	FY 2	2009	FY :	2010	FY 2	2011
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$4,012,760	\$3,661,476	\$4,024,746	\$	\$4,024,332	\$
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$	\$0	\$
3. State Funds (Line3, Form 2)	\$2,761,046	\$3,407,775	\$2,863,000	\$	\$2,933,000	\$
4. Local MCH Funds (Line4, Form 2)	\$ 345,000	\$ 539,827	\$ 389,515	\$	\$ 482,266	\$
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$	\$0	\$
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$	\$0	\$
7. Subtotal	\$	\$	\$	\$0	\$	\$0
		(THE FEI	DERAL-STATE TITLE E	BLOCK GRANT PARTN	IERSHIP)	
8. Other Federal Funds (Line10, Form 2)	\$122,175,824	\$0	\$169,056,259	\$	\$136,673,763	\$
9. Total (Line11, Form 2)	\$ 129,294,630	\$7,609,078	\$176,333,520	\$0	\$144,113,361	\$0
			(STATE MCH B	UDGET TOTAL)		

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. Section Number: Form3_Main

Field Name: StateMCHFundsExpended

Row Name: State Funds Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 4 and Form 5.

2. Section Number: Form3_Main

Field Name: LocalMCHFundsExpended

Row Name: Local MCH Funds Column Name: Expended

Year: 2009 Field Note:

Expenditures differ from budget by more than 10% is due to systemic problem with definition and forms. The variations are explained by unbudgeted carryover, orginating with the misinterpretation of the financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

3. Section Number: Form3_Main

Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended

Year: 2009

Field Note:

This is not reported because the monitoring of expenditures of "Other Federal Funds" is outside of the administration of the Title V/MCH Block Grant. These actual expenditures are the primary responsibility of many other program managers supervised by the MCH Director and CSHCN.

4. Section Number: Form3_Main Field Name: OtherFedFundsExpended

Row Name: Other Federal Funds

Column Name: Expended

Column Name: Expended Year: 2008

Field Note:

This is not reported because the monitoring of expenditures of "Other Federal Funds" is outside of the administration of the Title V/MCH Block Grant. These actual expenditures are the primary responsibility of many other program managers supervised by the MCH Director and CSHCN.

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: NE

	FY 2006					FY 2007			FY 2008			
I. Federal-State MCH Block Grant Partnership	Bu	DGETED	Ехр	ENDED	But	OGETED	Exp	PENDED	Βυ	DGETED	Exi	PENDED
a. Pregnant Women	\$	763,249	\$	1,386,896	\$	1,370,026	\$	1,171,745	\$	1,435,191	\$	1,251,34
b. Infants < 1 year old	\$	701,477	\$	649,226	\$	903,358	\$	655,830	\$	801,476	\$	831,88
c. Children 1 to 22 years old	\$	1,960,813	\$	2,937,918	\$	1,865,887	\$	2,558,116	\$	1,924,718	\$	2,313,38
d. Children with Special Healthcare Needs	\$	2,856,600	\$	2,260,864	\$	3,046,701	\$	2,725,616	\$	3,062,436	\$	2,759,460
e. Others	\$	821,720	\$	302,146	\$	462,920	\$	424,422	\$	418,170	\$	520,228
f. Administration	\$	200,000	\$	150,136	\$	145,332	\$	139,034	\$	156,567	\$	164,541
g. SUBTOTAL	\$	7,303,859	\$	7,687,186	\$	7,794,224	\$	7,674,763	\$	7,798,558	\$	7,840,839
II. Other Federal Funds (under the	ontr	ol of the person re	espor	nsible for admini	strati	on of the Title V	prog	ram).				
a. SPRANS	\$	0			\$	0			\$	0		
b. SSDI	\$	0			\$	100,000			\$	99,954		
c. CISS	\$	0			\$	218,740			\$	0		
d. Abstinence Education	\$	218,740			\$	0			\$	0		
e. Healthy Start	\$	0			\$	0			\$	0		
f. EMSC	\$	0			\$	0			\$	0		
g. WIC	\$	24,315,391			\$	25,359,978			\$	26,046,916		
h. AIDS	\$	0			\$	0			\$	0		
i. CDC	\$	2,067,000			\$	2,218,900			\$	2,218,900		
j. Education	\$	0			\$	0			\$	0		
k.Other]											
see field note	\$	51,365,169			\$	0			\$	84,654,289		
see field note	\$	0			\$	69,866,812			\$	0		
III. SUBTOTAL	\$	77,966,300			\$	97,764,430			\$	113,020,059		

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: NE

		FY 2	2009)		FY 2	2010			FY 2	2011
I. Federal-State MCH Block Grant Partnership	But	OGETED	Exp	PENDED	Bu	DGETED	EXPENDE)	Bui	OGETED	EXPENDED
a. Pregnant Women	\$	313,019	\$	856,974	\$	577,197	\$		\$	728,964	\$
b. Infants < 1 year old	\$	668,929	\$	690,498	\$	663,817	\$		\$	622,881	\$
c. Children 1 to 22 years old	\$	2,030,365	\$	1,477,034	\$	1,970,630	\$		\$	1,965,238	\$
d. Children with Special Healthcare Needs	\$	3,081,143	\$	3,475,299	\$	3,014,817	\$		\$	3,067,215	\$
e. Others	\$	861,894	\$	945,920	\$	890,998	\$		\$	891,014	\$
f. Administration	\$	163,456	\$	163,353	\$	159,802	\$		\$	164,286	\$
g. SUBTOTAL	\$	7,118,806	\$	7,609,078	\$	7,277,261	\$	0	\$	7,439,598	\$0
]						,				
II. Other Federal Funds (under the c	1	0 of the person r	espo	nsible for admini	strat	on of the litle V	program).		œ.	0	
a. SPRANS	<u> </u>				=				> _	<u> </u>	
b. SSDI	\$	99,954			\$	99,954			\$	99,954	
c. CISS	\$	0			\$	0			\$	0	
d. Abstinence Education	\$	0			\$	0			\$	218,740	
e. Healthy Start	\$	0			\$	0			\$	0	
f. EMSC	\$	0			\$	0			\$	0	
g. WIC	\$	29,602,585			\$	32,904,895			\$	34,195,833	
h. AIDS	\$	0			\$	0			\$	0	
i. CDC	\$	6,649,579			\$	9,356,733			\$	8,143,638	
j. Education	\$	0			\$	0			\$	0	
k.Other]		_								
see note	\$	0			\$	126,694,677			\$	94,015,598	
see notes	\$	85,823,706			\$	0			\$	0	
III. SUBTOTAL	\$	122,175,824			\$	169,056,259			\$	136,673,763	

FORM NOTES FOR FORM 4

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

FIELD LEVEL NOTES

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: PregWomenExpended Row Name: Pregnant Women Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: PregWomenExpended Row Name: Pregnant Women Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership Field Name: Children_1_22Expended

Row Name: Children 1 to 22 years old

Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: Children_1_22Expended Row Name: Children 1 to 22 years old

Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: CSHCNExpended Row Name: CSHCN Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended Row Name: All Others Column Name: Expended

Year: 2008

Field Note: Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminBudgeted Row Name: Administration Column Name: Budgeted

Year: 2008 Field Note:

Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended Row Name: Administration Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: NE

Type of Sepvice	FY 2	2006	FY 2	2007	FY 2	2008
TYPE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$	\$	\$ 2,325,969	\$	\$\$	\$ 2,258,985
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$1,350,412	\$1,351,648	\$1,590,184	\$1,550,484	\$1,358,725	\$2,104,196
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$\$	\$1,358,251	\$	\$ 1,795,629	\$1,566,706	\$ 1,915,763
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$1,672,974	\$	\$1,872,328	\$1,384,270	\$1,938,113	\$1,561,895
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$7,303,859	\$7,687,186	\$7,794,224	\$7,674,763	\$7,798,558	\$7,840,839

STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: NE

Type of Cepyton	FY 2	2009	FY 2	2010	FY 2011		
TYPE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 2,465,526	\$ 2,003,571	\$ 2,032,153	\$	\$ 1,931,935	\$	
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$1,732,862	\$2,099,692	\$1,954,417	\$	\$2,019,842	\$	
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,337,721	\$ 1,897,798	\$\$	\$	\$1,828,530	\$	
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$1,582,697	\$1,608,017	\$1,266,362	\$	\$1,659,291	\$	
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$	\$7,609,078	\$7,277,261	\$0	\$7,439,598	\$0	

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

Section Number: Form5_Main Field Name: DirectHCExpended Row Name: Direct Health Care Services

Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form5_Main Field Name: DirectHCExpended Row Name: Direct Health Care Services

Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5,

Section Number: Form5 Main Field Name: EnablingExpended Row Name: Enabling Services Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form5_Main Field Name: EnablingExpended Row Name: Enabling Services Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

Section Number: Form5 Main Field Name: PopBasedBudgeted Row Name: Population-Based Services

Column Name: Budgeted

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form5 Main Field Name: PopBasedExpended Row Name: Population-Based Services

Column Name: Expended

Year: 2009 Field Note:

Expenditure differs from budget by more than 10% due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4 and Form 5.

Section Number: Form5_Main Field Name: PopBasedExpended Row Name: Population-Based Services

Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

Section Number: Form5_Main Field Name: InfrastrBuildExpended Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2008 Field Note:

Expenditure differs from budget by more than 10% is due to systemic problems with definition and forms. The variations are explained by unbudgeted carryover, originating with the misinterpretation of the Financial Status Report (FRS) which feeds Form 2, Form 3, Form 4, Form 5.

			FORM 6								
NUMBER AND PER	CENTAGE OF N			EENED, CASES	CONFIRMED, A	ND TREATED					
			t. 506(a)(2)(B)(iii)								
otal Births by Occurrence: 27,199 Reporting Year: 2009											
Type of Screening Tests	Tests (1) Presumptive Positive Confirmed Cases (2)										
No. % Screens Cases (2) No. %											
Phenylketonuria	27,131	99.7	5	3	3	100					
Congenital Hypothyroidism	27,131	99.7	56	14	14	100					
Galactosemia	27,131	99.7	2	0	0						
Sickle Cell Disease	27,131	99.7	1	1	1	100					
Other Screening (Specify)											
Biotinidase Deficiency	27,131	99.7	5	5	5	100					
Cystic Fibrosis	27,131	99.7	27	8	8	100					
SC-Disease	27,131	99.7	5	5	5	100					
Very Long-Chain Acyl-CoA Dehydrogenase Deficiency	27,131	99.7	1	1	1	100					
3-Methylcrotonyl-CoA Carboxylase Deficiency	27,131	99.7	1	1	1	100					
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	27,131	99.7	1	1	1	100					
Medium-Chain Acyl- CoA Dehydrogenase Deficiency	27,131	99.7	3	3	3	100					
S-Beta Thalassemia	27,131	99.7	3	3	3	100					
Hearing Screening	26,824	98.6	1,167	43	30	69.8					
Short-Chain Acyl- CoA Dehydrogenase Deficiency	27,131	99.7	3	3	3	100					
B-Thalassemia Major	27,131	99.7	1	1	1	100					
C-Disease	27,131	99.7	1	1	1	100					
E-Disease	27,131	99.7	1	1	1	100					
Hyperphenylalanemia	27,131	99.7	1	1	1	100					
Screening Programs (1) Use occurrent birth (2) Report only those f (3) Use number of con	s as denominator	г. ns.	pecify Tests by	name)							

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

Section Number: Form6_Main
 Field Name: SickleCellDisease_Confirmed
 Row Name: SickleCellDisease

Column Name: Confirmed Cases Year: 2011

Field Note:
One infant identified on screening as presumptive positive and that same infant was confirmed.

Number of Individuals Served (Unduplicated) under Title V (BY Class of Individuals and Percent of Health Coverage)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: NE

Reporting Year: 2009

	TITLE V		PRIMAR	Y SOURCES OF COV	'ERAGE	
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	1,575	91.0	0.0	1.0	8.0	0.0
Infants < 1 year old	27,131	37.0	0.0	57.0	3.0	3.0
Children 1 to 22 years old	12,309	18.0	5.0	18.0	59.0	0.0
Children with Special Healthcare Needs	2,147	58.0	13.0	11.0	18.0	0.0
Others	11,925	14.0	0.0	17.0	69.0	0.0
TOTAL	55,087					
		'				

FORM NOTES FOR FORM 7
None

FIELD LEVEL NOTES

None

FORM 8 DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX (BY RACE AND ETHNICITY) [Sec. 506(A)(2)(C-D)] STATE: NE

Reporting Year: 2009

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	27,198	21,161	1,776	335	704	0	0	3,222
Title V Served	1,580	966	392	191	14	0	2	15
Eligible for Title XIX	11,668	6,118	1,360	339	152	0	0	3,699
INFANTS								
Total Infants in State	28,791	24,932	2,230	670	897	62	0	0
Title V Served	27,131	21,109	1,772	334	702	0	0	3,214
Eligible for Title XIX	13,871	7,472	1,461	379	188	18	3,424	929

II. UNDUPLICATED COUNT BY ETHNICITY

			пог	ANIC OR LATING	2 (Sub-categorie	s by country or area o	origin)
(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
23,145	4,051	2	0	0	0	0	4,051
1,211	368	1	3	0	0	0	365
8,762	2,906	0	0	0	0	0	2,906
24,096	4,695	0	0	0	0	0	4,695
21,845	5,286	0	0	0	0	0	5,286
9,694	4,866	918	0	0	0	0	4,866
	23,145 1,211 8,762 24,096 21,845	Total NOT Hispanic or Latino	Total NOT Hispanic or Latino	Total NOT Hispanic or Latino	Total NOT Hispanic or Latino	Total NOT Hispanic or Latino	Total NOT Hispanic or Latino

FORM NOTES FOR FORM 8
None

FIELD LEVEL NOTES

None

FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL) [Secs. 505(A)(E) AND 509(A)(B)] STATE: NE

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM [Secs. 505(A)(E) AND 509(A)(B)] STATE: NE

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	800-862-1889	(800) 862-1889	(800) 862-7889	(800) 862-1889	(800) 862-1889
2. State MCH Toll-Free "Hotline" Name	Nebraska Healthy Mothers, Healthy Babies Hotline	Nebraska Healthy Mothers, Health Babies Hotline	Nebraska Healthy Mothers, Healthy Babies Helpline	Nebraska Healthy Mothers, Healthy Baby Helpline	Nebraska Healthy Mothers, Healthy Baby Helpline
3. Name of Contact Person for State MCH "Hotline"	Sue Spanhake	Sue Huffman	Jan Heusinkvelt	Jan Heusinkvelt	Jan Heusinkvelt
4. Contact Person's Telephone Number	402-471-1938	(402) 471-1938	(402) 471-0165	(402) 471-0165	(402) 471-0165
5. Contact Person's Email	sue.spanhake@nebraska	sue.huffman@nebraska.ţ			
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	338	412	306

FORM NOTES FOR FORM 9
None

FIELD LEVEL NOTES

None

FORM 10 TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2011 [SEC. 506(A)(1)]

STATE: NE

1. State MCH Administration:

Title V / MCH Services Block Grant to Nebraska Department of Health and Human Services (DHHS) is administered within Lifespan Health Services by a unit entitled Planning & Support. Nebraska describes Title V as a funding source that supports programs, not a program itself. The Block Grant supports many of the programs within Lifespan Health Services, as well as other DHHS programs/units. Title V/MCH also supports community-based organizations, e.g. local health departments, community action programs, and programs administered within Native American Tribes and academic institutions. The term administration is vaguely defined by the federal Maternal and Child Health Bureau (MCHB). The limited definition is problematic since one of the statutory requirements of Title V is that the cost of administration of the block grant cannot exceed 10% of the federal allotment. Given our interpretation and subsequent activities, less than 4% is expended for administration. The Planning & Support unit manages the various grant processes, e.g. evaluating the best methods to distribute the block grant funds within its parameters, and monitoring the activities and finances of its grant-funded work. In addition, the unit assists with assessment, planning, implementation, and evaluation of the block grant funds and activities. An ancillary responsibility to the administration of the block grant considers the variety of other resources that impact the maternal and child health population in Nebraska. A holistic view aids in planning for the most efficient and effective use of public health resources relative to the Block Grant. Therefore, using a broad interpretation, the administration of Title V/MCH Block Grant is the sole function of this unit. Two FTEs accomplish the activities of this unit, classified as: 1) Federal Aid Administrator III and 2) Administrative Assistant I. Both positions are allocable to the Block Grant via the internal allocation to Planning & Support. The unit collaborates with Grants & Cost Management and Accounting units to: 1) reconcile expenditures in the Nebraska Information System to that of the reports from internals and externals, and subsequently to complete the annual application and report for the block grant; 2) respond with information for the audit; and 3) project funds available for FY 2011.

Block Grant Funds		
2. Federal Allocation (Line 1, Form 2)	\$ 4,024,332	
3. Unobligated balance (Line 2, Form 2)	\$ 0	
4. State Funds (Line 3, Form 2)	\$ 2,933,000	
5. Local MCH Funds (Line 4, Form 2)	\$ 482,266	
6. Other Funds (Line 5, Form 2)	\$ 0	
7. Program Income (Line 6, Form 2)	\$ 0	
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 7,439,598	
Most significant providers receiving MCH funds:	 Com	State level programs/units munity Level Service Providers Local Health Departments
		Federally-recognized Tribes
10. Individuals served by the Title V Program (Col. A, Form 7)		, ,
a. Pregnant Women	1,575	
b. Infants < 1 year old	27,131	
c. Children 1 to 22 years old	10 200	
	 12,309	
d. CSHCN	2,147	
d. CSHCN e. Others		

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:

Nebraska groups population-based, direct care and enabling services into "services" generally, defining services as activities directed at the needs of a population. Direct, enabling, and population-based services are the primary focus of the MCH/Title V Block Grant to community-based organizations to address Nebraska priority needs in local communities. This support encourages a local community to assess its resources and capacity to address the health needs of Nebraska mothers and children. The state agency provides technical assistance and financial resources to communities to implement work plans and evaluate if outcomes are reached. The three categories comprising services are also addressed at the state agency level, as is infrastructure building.

b. Population-Based Services:

(max 2500 characters)

See Subsections 11.a and 11.c.

c. Infrastructure Building Services:

(max 2500 characters)

Nebraska delineates infrastructure building from other services (described in subsection 11.a.) by those activities that focus on overall capacity-building to address the MCH priority needs. Infrastructure is largely supported at the state-level.

12. The primary Title V Program contact person:

13. The children with special health care needs (CSHCN) contact person:

Name _	Paula Eurek	Name	Susan Buettner
Title _	Administrator, Lifespan Health Services	Title	Administrator, Longterm Care Program
Address	3rd Floor, PO Box 95026	Address	5th Floor, PO Box 95026

City	Lincoln	City	Lincoln
State	NE	State	NE
Zip	68509	Zip	68509
Phone	402-471-0196	Phone	402-471-9345
Fax	402-471-7049	Fax	402-471-6352
Email	paula.eurek@nebraska.gov	Email	susan.buettner@nebraska.gov
Web	http://www.dhhs.ne.gov/lifespanhealth/	Web	

FORM NOTES FOR FORM 10
None

FIELD LEVEL NOTES

None

TRACKING PERFORMANCE MEASURES

[SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)]

STATE: NE

Form Level Notes for Form 11

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data								
2008	2009							
00	100 100							
0.0	100.0							
85	545 600							
85	545 600							
Program Da	ata Program Data							
Final	Final							
rformance Data								
2013	2014							
00	100 100							
)0								

Field Level Notes

Section Number: Form11_Performance Measure #1

Field Name: PM01 Row Name: Column Name: Year: 2009 Field Note:

123 babies had a presumptive positive and 477 had inconclusive screening result for a disease requiring confirmatory or repeat testing(follow up). (this number does not include hemoglobinopathy patterns that were indicative of trait/carrier status)

4 out of the 477expired and required no follow up.

Section Number: Form11_Performance Measure #1

Field Name: PM01 **Row Name:** Column Name: Year: 2008 Field Note:

545 babies had a presumptive positive or inconclusive screening result for a disease requiring confirmatory or repeat testing(follow up). (this number does not include hemoglobinopathy patterns that were indicative of trait/carrier status)

23 out of the 545 expired and required no follow up.

PERFORMANCE MEASURE # 02					
The percent of children with special health care needs age 0 to 18 year (CSHCN survey)	ars whose families p	artner in decision mal	king at all levels and	are satisfied with the s	ervices they receive.
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	70	67.7	69.1	67	68.4
Annual Indicator	66.4	66.4	65.7	65.7	65.7
Numerator	326	326			
Denominator	491	491			
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	69.7	71.1	72.5	74	75.8
Annual Indicator Numerator Denominator					

1. Section Number: Form11_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2009 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Weighted data

2. Section Number: Form11_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey. Weighted data

3. Section Number: Form11_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 03					
The percent of children with special health care needs age 0 to 18 wh	no receive coordinate	ed, ongoing, compreh	ensive care within a r	nedical home. (CSHC	N Survey)
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	55	55	56.1	55.2	56.4
Annual Indicator	53.8	53.8	54.2	54.2	54.2
Numerator	706	706			
Denominator	1,313	1,313			
Data Source	•			National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)	·				
Is the Data Provisional or Final?	•			Final	Final
		<u>Annual C</u>	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	57.5	58.6	59.8	61	62.2
Annual Indicator					
Numerator					
Denominator	•				

1. Section Number: Form11_Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2009 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03. Weighted data.

2. Section Number: Form11_Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03. Weighted data.

3. Section Number: Form11_Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

PERFORMANCE MEASURE # 04					
The percent of children with special health care needs age 0 to 18 wh Survey)	ose families have a	dequate private and/o	r public insurance to	pay for the services th	ey need. (CSHCN
		Annual C	bjective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	65	65	66.3	67.2	68.6
Annual Indicator	63.5	63.5	65.9	65.9	65.9
Numerator	719	719	-		
Denominator	1,133	1,133			
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	69.9	71.3	72.8	74.2	75.6
Annual Indicator Numerator					
Denominator					

1. Section Number: Form11_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2009 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey. Weighted data.

2. Section Number: Form11_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey. Weighted data.

3. Section Number: Form11_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 05					
Percent of children with special health care needs age 0 to 18 whose Survey)	families report the c	ommunity-based serv	ice systems are orga	nized so they can use	them easily. (CSHCN
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	80	81.4	83	93.7	95.6
Annual Indicator	79.8	79.8	91.9	91.9	91.9
Numerator	327	327			
Denominator	410	410			
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	97.5	99.4	100	100	100
Annual Indicator Numerator Denominator					

1. Section Number: Form11_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2009 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05. Weighted data.

2. Section Number: Form11_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05. Weighted data.

3. Section Number: Form11_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

PERFORMANCE MEASURE # 06					
The percentage of youth with special health care needs who received and independence.	the services necess	sary to make transitior	ns to all aspects of ad	lult life, including adult	health care, work,
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	10	5.2	5.3	55.4	56.6
Annual Indicator	5.1	5.1	54.4	54.4	54.4
Numerator	118	118			
Denominator	2,314	2,314			
Data Source				National Survey of CSHCN	National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	57.7	58.8	60	61.2	62.4
Annual Indicator Numerator Denominator					

1. Section Number: Form11_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2009 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data. Weighted data.

2. Section Number: Form11_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data. Weighted data.

3. Section Number: Form11_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2007

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

PERFORMANCE MEASURE # 07					
Percent of 19 to 35 month olds who have received full schedule of age Haemophilus Influenza, and Hepatitis B.	e appropriate immu	inizations against Mea	sles, Mumps, Rubella	a, Polio, Diphtheria, Te	etanus, Pertussis,
		Annual (Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	83.9	85.4	86.9	83.5	83.6
Annual Indicator	89.1	81	85.2	74.8	64.9
Numerator					
Denominator					
Data Source				CDC NIS	CDC NIS
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
	2010	<u>Annual (</u> 2011	Objective and Perfor 2012	mance Data 2013	2014
Annual Performance Objective	76.2	77.8	79.4	80.9	82.5
Annual Indicator					
Numerator					
Denominator					

1. Section Number: Form11_Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2009 Field Note:

Field Note:
Data is Q3/2008-Q2/2009. The entire 2009 data has not been released by CDC.

2. Section Number: Form11_Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2008 Field Note:

Data is Q3/2007-Q2/2008. The entire 2008 data has not been released by CDC.

3. Section Number: Form11_Performance Measure #7
Field Name: PM07
Row Name:

Field Name: PMG Row Name: Column Name: Year: 2007 Field Note:

Data is Q3/2006-Q2/200. The entire 2007 data has not been released by CDC.

PERFORMANCE MEASURE # 08							
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.							
			Annual C	bjective and Pe	formance D	ata	
	2005	2006		2007	2008		2009
Annual Performance Objective	17.5		17.7	15	.9	16.6	17.4
Annual Indicator	18.1		16.3	18	.1	18.2	17.4
Numerator	690		616	68	37	671	633
Denominator	38,097		37,844	37,86	3	36,878	36,349
Data Source					Birth Fi Est.	ile, Census	Birth File, Census Est.
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)							
Is the Data Provisional or Final?					Final		Final
			Annual Objective and Performance Data			ata	
	2010	2011		2012	2013		2014
Annual Performance Objective	17.1		16.7	16	.4	16.1	15.7
Annual Indicator Numerator Denominator							

1. Section Number: Form11_Performance Measure #8
Field Name: PM08
Row Name:
Column Name: Year: 2008 Field Note:

Birth file is not complete or cleaned.

2. Section Number: Form11_Performance Measure #8 Field Name: PM08

Row Name: Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births).

				Annual C	bjective and Perfo	rmance Data	
	2005		2006		2007	2008	2009
Annual Performance Objective		45.7		46.8	47.8	48.9	50
Annual Indicator		44.6		44.6	44.6	44.6	44.6
Numerator	1	0,489		10,489	10,489	10,489	10,489
Denominator	2	23,518		23,518	23,518	23,518	23,518
Data Source						NE Open Mouth Survey 2004	NE Open Mouth Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)							
Is the Data Provisional or Final?						Final	Final
				Annual C	bjective and Perfo	rmance Data	
	2010		2011		2012	2013	2014
Annual Performance Objective		50		50	50	50	50
Annual Indicator							

None

ERFORMANCE MEASURE # 10 ne rate of deaths to children aged 14 years and younger caused by m	notor vohiclo cras	nos por 100 000	children			
ie rate of deaths to children aged 14 years and younger caused by in	iotor veriicie crasi	•		jective and Perfor	mance Data	
	2005	2006		2007	2008	2009
Annual Performance Objective	4.4		3.8	3.4	3.4	3.3
Annual Indicator	5.3		3.8	4.1	1.7	3.4
Numerator	18		13	14	6	12
Denominator	338,806	339	9,983	341,855	343,908	349,420
Data Source					Death file, Census Est.	Death file, Censu Est.
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Final	Provisional
		Ar	nual Ob	jective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	3.2		3.1	3	2.9	2.8
Annual Indicator Numerator						

1. Section Number: Form11_Performance Measure #10

Field Name: PM10 Row Name: Column Name: Year: 2009 Field Note:

2009 death file in not complete.

2. Section Number: Form11_Performance Measure #10 Field Name: PM10

Field Name: PM² Row Name: Column Name: Year: 2008 Field Note: 2008 death file in

2008 death file in not complete.

3. Section Number: Form11_Performance Measure #10 Field Name: PM10 Row Name:

Field Name: PM Row Name: Column Name: Year: 2007 Field Note:

Field Note: 2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

ERFORMANCE MEASURE # 11 e percent of mothers who breastfeed their infants at 6 months of ac	10					
e percent of mothers who breastreed their infants at 6 months of ag	je.					
	2005	2006	<u>Annuai C</u>	bjective and Perfor	2008	2009
		2006	25.0	2007		
Annual Performance Objective			35.8	48.8	56	66.5
Annual Indicator	35.	<u> </u>	47.9	55.1	65.2	46
Numerator						
Denominator						
Data Source			_	_	National Immunization Survey	National Immunization Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.						
(Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?					Final	Final
			Annual C	bjective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	4	7	48	49	50	5 ⁻
Annual Indicator						
Numerator						
Denominator						

1. Section Number: Form11_Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2009 Field Note:

80.01% of woman reported initiating breastfeeding of those 46% reported breastfeeding longer than 180 days. However, only 32.5% reported exclusive breasting over 180 days.

2. Section Number: Form11_Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2008 Field Note:

76.42% of woman reported initiating breastfeeding of those 65.2% reported breastfeeding longer than 180 days. However, only 35.3% reported exclusive breasting over 180 days.

3. Section Number: Form11_Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2007 Field Note:

Data source is CDC's National Immunization Survey, 2006 (weighted data).

ercentage of newborns who have been screened for hearing before I	Toophar alcorrary	,0.	A	Note attive and Danfan		
	2005	2006	Annuar	Objective and Perfor 2007	2008	2009
Annual Performance Objective	ζ	99	99.7	99	99.9	100
Annual Indicator	99	.6	98.9	99.0	99.3	98.9
Numerator	26,17	' 9	26,615	26,669	26,791	26,804
Denominator	26,29	93	26,898	26,948	26,972	27,103
Data Source					Program Data	Program Data
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Final	Final
			Annual C	Objective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	10)0	100	100	100	100
Annual Indicator						

1. Section Number: Form11_Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2008
Field Note:
Of the 151 infants not screened 7 were refusals. The denominator is births - 112 infant deaths.

PERFORMANCE MEASURE # 13							
Percent of children without health insurance.							
				Annual C	bjective and Perfor	mance Data	
	2005		2006		2007	2008	2009
Annual Performance Objective		12.2		11.3	12.3	13.6	15.9
Annual Indicator		11.5		12.6	13.9	16.2	19.0
Numerator		18,000		19,000	22,000	24,000	30,000
Denominator	15	56,000		151,000	158,000	148,000	158,000
Data Source						Census	Census
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)							
Is the Data Provisional or Final?						Final	Final
				Annual C	Objective and Perfor	mance Data	
	2010		2011		2012	2013	2014
Annual Performance Objective		18.6		18.2	17.8	17.5	17.2
Annual Indicator							
Numerator							
Denominator							

				Annual C	bjective and	Perfori	mance Data	1		
	2005		2006		2007		2008		2009	
Annual Performance Objective				32		31.4		33.7		35.7
Annual Indicator	;	32.9		33.5		34.4		36.4		38.1
Numerator	4,	,848		5,036		5,263		6,204		4,928
Denominator	14,	,724		15,028	15	5,311		17,034		12,918
Data Source							NE WIC		NE WIC	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)										
Is the Data Provisional or Final?							Final		Final	
			<u>,</u>	Annual C	bjective and	Perfori	mance Data	<u>1</u>		
	2010		2011		2012		2013		2014	
Annual Performance Objective	;	37.1		36.6		35.8		35.1		34.4
Annual Indicator										
Numerator										
Denominator										

PERFORMANCE MEASURE # 15						
Percentage of women who smoke in the last three months of pregnan	cy.					
			Annual C	Objective and Perfor	mance Data	
	2005	2006		2007	2008	2009
Annual Performance Objective			11.9	11.7	11.3	11.5
Annual Indicator	12.2		11.8	11.6	11.8	10.6
Numerator	3,186		3,148	3,122	3,184	2,852
Denominator	26,143		26,629	26,935	26,992	26,931
Data Source	!				Birth file	Birth file
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)	· ·	. <u></u>				
Is the Data Provisional or Final?					Final	Final
			Annual C	Objective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	10.3		10.2	9.9	9.8	9.6
Annual Indicator						
Numerator						
Denominator						

1. Section Number: Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2007
Field Note:
Out of state resident births are not yet in the data file (1000+ births).

PERFORMANCE MEASURE # 16					
The rate (per 100,000) of suicide deaths among youths aged 15 through	ıgh 19.				
			al Objective and Perfo		
	2005	2006	2007	2008	2009
Annual Performance Objective	7.5	13.	4 13.1	12.8	12.9
Annual Indicator	13.7	16.	.1 11.5	13.2	10.0
Numerator	18	2	15	17	13
Denominator	131,107	130,33	130,506	128,885	130,498
Data Source				Death file, Census Est.	Death file, Census Est.
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		<u>Annu</u>	al Objective and Perfo	rmance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	12.6	12.	.4 12.1	11.9	11.6
Annual Indicator Numerator Denominator	,				

1. Section Number: Form11_Performance Measure #16 Field Name: PM16 Row Name: Column Name: Year: 2009 Field Note:

Three year rolling average.

2. Section Number: Form11_Performance Measure #16

Field Name: PM16 Row Name: Column Name: Year: 2007 Field Note:

2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

I have switched to a three year rolling average based on reviewer recommendation.

PERFORMANCE MEASURE # 17					
Percent of very low birth weight infants delivered at facilities for high-ri	sk deliveries and ne	eonates.			
		<u>Annual</u>	Objective and Perfor	rmance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	74.3	78.2	73.7	69.2	69.8
Annual Indicator	74.6	71.9	68.1	63.5	57.9
Numerator	217	218	220	207	184
Denominator	291	303	323	326	318
Data Source				Birth file	Birth file
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		<u>Annual</u>	Objective and Perfor	rmance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	59	60.2	61.4	62.7	64
Annual Indicator					
Numerator Denominator					

1. Section Number: Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2007
Field Note:
Out of state resident births are not yet in the data file (1000+ births).

PERFORMANCE MEASURE # 18						
Percent of infants born to pregnant women receiving prenatal care beg	ginning in the first t	rimester.				
			Annual C	Objective and Perfor	mance Data	
	2005	2006		2007	2008	2009
Annual Performance Objective	84.6		79.3	80.9	74.8	73.6
Annual Indicator	77.8		71.5	73.2	72.1	72.0
Numerator	20,332		19,096	19,721	19,464	19,382
Denominator	26,144		26,723	26,935	26,992	26,931
Data Source					Birth file	Birth file
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Provisional	Provisional
			Annual C	Objective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	75.1		76.6	78.1	79.7	81
Annual Indicator Numerator Denominator						

1. Section Number: Form11_Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2007
Field Note:
Out of state resident births are not yet in the data file (1000+ births). Over 2% of the data for this PM is missing/unknown.

FORM 11

TRACKING PERFORMANCE MEASURES [Secs 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)] STATE: NE

Form Level Notes for Form 11

STATE PERFORMANCE MEASURE # 1 - REPORT	TING YEAR
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Percent women (18-44) with healthy weight (BMI)

		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective		52.6	53.6	54.2	54.6
Annual Indicator	51.6	49.9	54	53.5	49.4
Numerator					
Denominator					
Data Source				NE BRFSS	NE BRFSS
Is the Data Provisional or Final?				Final	Final
		Annual (Objective and Perfor	mance Data	

2012 2013

2010 2011 2014 **Annual Performance Objective** 55.6 56.7 57.9 59

Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #1

Field Name: SM1 **Row Name:** Column Name: Year: 2009 Field Note:

2009 NE BRFSS, weighted data.

2. Section Number: Form11_State Performance Measure #1

Field Name: SM1 **Row Name:** Column Name: Year: 2008 Field Note:

2008 NE BRFSS, weighted data.

3. Section Number: Form11_State Performance Measure #1

Field Name: SM1 Row Name: Column Name: Year: 2007 Field Note:

2007 NE BRFSS, weighted data.

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR Percent of women of child-bearing age who report smoking in the last 30 days **Annual Objective and Performance Data** 2005 2006 2007 2008 2009 19.1 19.9 **Annual Performance Objective** 19.3 17.5 21.4 17.6 **Annual Indicator** 25.4 21.9 19.5 20.3 Numerator Denominator **Data Source NE BRFSS** NE BRFSS Is the Data Provisional or Final? Final Final **Annual Objective and Performance Data** 2010 2011 2012 2013 2014 19.5 19.1 19.7 18.3 **Annual Performance Objective** Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may **Denominator** establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #2

Field Name: SM2 Row Name: Column Name: Year: 2009 Field Note:

2009 NE BRFSS, weighted data.

2. Section Number: Form11_State Performance Measure #2

Field Name: SM2 Row Name: Column Name: Year: 2008 Field Note:

2008 NE BRFSS, weighted data.

3. Section Number: Form11_State Performance Measure #2

Field Name: SM2 Row Name: Column Name: Year: 2007 Field Note:

20067 NE BRFSS, weighted data.

STATE PERFORMANCE MEASURE #3 - REPORTING YEAR Percent of women age (18-44) who report mental health not good 10+ days of past 30 **Annual Objective and Performance Data** 2005 2006 2007 2008 2009 12.9 10.5 **Annual Performance Objective** 10.1 13.2 10.3 **Annual Indicator** 13.5 13.1 10.8 14.4 Numerator Denominator **Data Source NE BRFSS** NE BRFSS Is the Data Provisional or Final? Final Final **Annual Objective and Performance Data** 2010 2011 2012 2013 2014 10.3 10.1 9.7 **Annual Performance Objective** Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may **Denominator** establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #3

Field Name: SM3 Row Name: Column Name: Year: 2009 Field Note:

2009 NE BRFSS, weighted data.

2. Section Number: Form11_State Performance Measure #3

Field Name: SM3 Row Name: Column Name: Year: 2008 Field Note: 2008 weighted data

3. Section Number: Form11_State Performance Measure #3

Field Name: SM3 Row Name: Column Name: Year: 2007 Field Note:

2007 NE BRFSS, weighted data.

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR Percent of teens who report use of alcohol in last 30 days **Annual Objective and Performance Data** 2005 2006 2007 2008 2009 45.6 40.1 39.3 **Annual Performance Objective** 42 **Annual Indicator** 42.9 42.9 41.1 41.1 31.3 Numerator Denominator **Data Source NE YRBS NE YRBS** Is the Data Provisional or Final? Final Final **Annual Objective and Performance Data** 2010 2011 2012 2013 2014 38.5 37.7 36.2 **Annual Performance Objective** Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may

Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #4

Field Name: SM4 Row Name: Column Name: Year: 2009 Field Note:

2009 YRBS did not achieve an adequate response rate.

2. Section Number: Form11_State Performance Measure #4

Field Name: SM4 Row Name: Column Name: Year: 2008 Field Note:

2007 YRBS did not achieve an adequate response rate. YRBS is conducted every two years.

3. Section Number: Form11_State Performance Measure #4

Field Name: SM4 Row Name: Column Name: Year: 2007 Field Note:

2007 YRBS did not achieve an adequate response rate.

ercent premature births (births<37 weeks)		_			
	2225		al Objective and Perfor		
	2005	2006	2007	2008	2009
Annual Performance Objective		8.7	7 9.8	9.6	9.
Annual Indicator	9.8	10.0	0 9.6	9.6	9.
Numerator	2,566	2,676	6 2,584	2,598	2,61
Denominator	26,144	26,723	3 26,935	26,992	26,93
Data Source				Birth file	Birth file
Is the Data Provisional or Final?				Final	Final
		<u>Annua</u>	al Objective and Perfor	rmance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	9.3	9.	1 8.9	8.8	
Annual Indicator	Future veer chiese	ives for state perfor	mance measures from i	noodo accomment no	riad 2006 2010 ar

1. Section Number: Form11_State Performance Measure #5 Field Name: SM5 Row Name:

Field Name: SM: Row Name: Column Name: Year: 2007 Field Note:

Field Note:
Out of state resident births are not yet in the data file (1000+ births).

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR Rate of infant death to adolescents (age 15-17) **Annual Objective and Performance Data** 2005 2006 2007 2008 2009 7.4 7.2 **Annual Performance Objective** 7.7 7.5 8.7 **Annual Indicator** 8.1 7.3 8.9 6 5 5 6 Numerator 690 616 687 671 Denominator Linked Birth and **Data Source** Death file Is the Data Provisional or Final? Provisional Provisional **Annual Objective and Performance Data** 2010 2011 2012 2013 2014 6.9 6.7 6.6 **Annual Performance Objective** Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #6

Field Name: SM6 Row Name: Column Name: Year: 2009 Field Note:

Data not yet available.

2. Section Number: Form11_State Performance Measure #6

Field Name: SM6 Row Name: Column Name: Year: 2008 Field Note:

Data not yet available.

3. Section Number: Form11_State Performance Measure #6

Field Name: SM6 Row Name: Column Name: Year: 2007 Field Note:

Data not yet available.

STATE PERFORMANCE MEASURE #7 - REPORTING YEAR

Incidence of confirmed SIDS cases (per 1,000 live births) among African American and Native American infants

	Annual Objective and Performance Data						
	2005	2006	2007	2008	2009		
Annual Performance Objective	2.5	2.7	2.6	2.3	2.3		
Annual Indicator	3.0	2.7	2.4	2.6	2.8		
Numerator	29	27	25	28	31		
Denominator	9,579	9,960	10,446	10,788	11,067		
Data Source Is the Data Provisional or Final?				Death file, Birth file Final	Death file, Birth file Provisional		

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	2.3	2.3	2.3	2.3	

Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #7

Field Name: SM7 Row Name: Column Name: Year: 2008 Field Note:

2008 Death file is incomplete, missing out of state deaths and few thousand causes of death.

Because numbers are so small this is (and has been) a 5 year average.

2. Section Number: Form11_State Performance Measure #7 Field Name: SM7

Row Name: Column Name: Year: 2007 Field Note:

2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

Because numbers are so small this is (and has been) a 5 year average.

STATE PERFORMANCE MEASURE #8 - REPORTING YEAR

The percent of African American women beginning prenatal care during the first trimester.

	Annual Objective and Performance Data						
	2005	2006	2007	2008	2009		
Annual Performance Objective	79.5	69.9	71.3	60.4	55.5		
Annual Indicator	68.6	58.8	58.4	54.6	48.9		
Numerator	1,033	1,030	1,069	970	964		
Denominator	1,505	1,752	1,831	1,778	1,970		
Data Source Is the Data Provisional or Final?				Birth file Final	Birth file Final		

Annual Objective and Performance Data

2	010	2011	2012	2013	2014
Annual Performance Objective	56.6	57.7	58.9	60	

Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are

Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may

Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #8

Field Name: SM8 Row Name: Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births). Nearly 7% of the data for this PM is missing/unknown.

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR Hospitalization for unintentional injuries (per 1,000) for children and adolescents **Annual Objective and Performance Data** 2005 2006 2007 2008 2009 110.2 109.8 129.3 **Annual Performance Objective** 110.4 **Annual Indicator** 117.5 118.6 129.8 125.9 55,225 55,890 61,254 60,413 Numerator 471,382 471,930 469,913 479,918 Denominator Hospital Discharge, **Data Source** Census data Is the Data Provisional or Final? Final Provisional **Annual Objective and Performance Data** 2010 2011 2012 2013 2014

124.7

Annual Performance Objective

Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

119.8

117.4

122.3

Field Level Notes

1. Section Number: Form11_State Performance Measure #9

Field Name: SM9 Row Name: Column Name: Year: 2009 Field Note:

HDD will be available in October 2010.

2. Section Number: Form11_State Performance Measure #9

Field Name: SM9 Row Name: Column Name: Year: 2008 Field Note:

HDD will be available in October 2009.

3. Section Number: Form11_State Performance Measure #9

Field Name: SM9 **Row Name:** Column Name: Year: 2007 Field Note:

HDD will be available in October 2008.

STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR Hospitalization for intentional injuries (per 1,000) for children and adolescents (age 1-19)

		Annual (Objective and Perfor	and Performance Data 2008 2009				
	2005	2006	2007	2008	2009			
Annual Performance Objective		5	4.9	4.8	3.8			
Annual Indicator	3.9	4.1	3.9	3.9				
Numerator	1,835	1,917	1,862	1,884				
Denominator	469,913	471,382	471,930	479,918				
Data Source				Hospital Discharge, Census data				

2011

3.7

Is the Data Provisional or Final?

2010

Annual Objective and Performance Data 2012 2013 2014 3.7 3.6 3.5

Final

Annual Performance Objective

Annual Indicator Future year objectives for state performance measures from needs assessment period 2006-2010 are Numerator view-only. If you are continuing any of these measures in the new needs assessment period, you may Denominator establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. Section Number: Form11_State Performance Measure #10

Field Name: SM10 Row Name: Column Name: Year: 2009 Field Note:

HDD will be available in October 2010.

2. Section Number: Form11_State Performance Measure #10

Field Name: SM10 **Row Name:** Column Name: Year: 2008 Field Note:

HDD will be available in October 2009.

3. Section Number: Form11_State Performance Measure #10

Field Name: SM10 **Row Name:** Column Name: Year: 2007 Field Note:

HDD will be available in October, 2008.

FORM 12 TRACKING HEALTH OUTCOME MEASURES [Secs 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)] STATE: NE

Form Level Notes for Form 12

OUTCOME MEASURE # 01					
The infant mortality rate per 1,000 live births.					
		Annual (Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	6.5	6.5	6.5	6.4	5.1
Annual Indicator	5.6	5.5	6.8	5.4	5.4
Numerator	147	148	183	146	146
Denominator	26,144	26,723	26,935	26,992	26,931
Data Source				Death file, Birth file	Death file, Birth file
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annual (Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	5.1	5	4.9	4.8	4.7
Annual Indicator Numerator Denominator	Please fill in only the not required for futi		above years. Numera	tor, Denominator and <i>i</i>	Annual Indicators are

Field Level Notes

1. Section Number: Form12_Outcome Measure 1

Field Name: OM01 Row Name: Column Name: Year: 2009 Field Note:

The death file is not complete.

2. Section Number: Form12_Outcome Measure 1 Field Name: OM01 Row Name:

Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births).

2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

		Annual	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	2.7	2.7	2.7	2.7	3.4
Annual Indicator	2.2	2.0	2.3	3.1	2.0
Numerator	11.9	11.8	15.3	16.3	11.2
Denominator	5.3	5.8	6.8	5.2	5.7
Data Source				Death file, Birth file	Death file, Birth fil
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annual	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	3	2.9	2.9	2.8	2.8
Annual Indicator					

1. Section Number: Form12_Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2009
Field Nate: Field Note:

2009 death file is not complete

2. Section Number: Form12_Outcome Measure 2 Field Name: OM02

Row Name: Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births).

2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

OUTCOME MEASURE # 03					
he neonatal mortality rate per 1,000 live births.					
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	4.1	4	4	4	3
Annual Indicator	3.3	3.5	4.9	3.3	3.3
Numerator	86	93	132	90	90
Denominator	26,144	26,723	26,935	26,992	26,931
Data Source				Death file, Birth file	Death file, Birth fil
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annual (Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	3	2.9	2.9	2.8	2.8
Annual Indicator Numerator	Please fill in only the		above years. Numera	or, Denominator and	Annual Indicators a
Denominator	not required for futt	ure year data.			

1. Section Number: Form12_Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2009
Field Nate: Field Note:

2009 Death file is not finalized.

2. Section Number: Form12_Outcome Measure 3 Field Name: OM03

Row Name: Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births).

2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

OUTCOME MEASURE # 04					
he postneonatal mortality rate per 1,000 live births.					
			Objective and Perfor		
	2005	2006	2007	2008	2009
Annual Performance Objective	2.4	2.3	2.3	2.3	1.9
Annual Indicator	2.3	2.1	1.9	2.1	2.1
Numerator	60	55	51	56	56
Denominator	26,144	26,571	26,935	26,992	26,931
Data Source				Death file, Birth file	Death file, Birth fil
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annual C	Objective and Perfor	mance Data	
	2010	2011	2012	2013	2014
Annual Performance Objective	1.9	1.9	1.9	1.8	1.8
Annual Indicator Numerator	Please fill in only th		above years. Numerat	tor, Denominator and A	Annual Indicators a
Denominator	not required for full	ure year data.			

he perinatal mortality rate per 1,000 live births plus fetal deaths.						
			Annual C	bjective and Perfor	mance Data	
	2005	2006		2007	2008	2009
Annual Performance Objective	8.		8.1	5	4.9	10.3
Annual Indicator	5.6	3	5.6	10.5	9.0	8.4
Numerator	147	<u> </u>	149	285	245	228
Denominator	26,144	<u> </u>	26,723	27,109	27,156	27,084
Data Source					Death file, Birth file	Death file, Birth fil
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Final	Provisional
			Annual C	bjective and Perfor	mance Data	
	2010	2011		2012	2013	2014
Annual Performance Objective	8.2	2	8	7.9	7.8	7.7
Annual Indicator Numerator	Please fill in only	the Objectiv	es for the a	bove years. Numerat	or, Denominator and A	Annual Indicators a

1. Section Number: Form12_Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2008
Field Note:
Data is not available at this time

Data is not available at this time.

2. Section Number: Form12_Outcome Measure 5 Field Name: OM05

Row Name: Column Name: Year: 2007 Field Note:

Jump in number reflects improved reporting

				Annual C	bjective and Perfor	mance Data	
	2005		2006		2007	2008	2009
Annual Performance Objective		22.6		21.1	20.1	2	17.9
Annual Indicator		21.3		19.4	20.5	20.	6 14.9
Numerator		72		66	70	7	1 52
Denominator		338,806		339,983	341,855	343,90	349,420
Data Source Check this box if you cannot report the numerator because						Death file, Cens Est.	us Death file, Censu Est.
There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)							-
Is the Data Provisional or Final?						Final	Provisional
				Annual C	bjective and Perfor	mance Data	
	2010		2011		2012	2013	2014
Annual Performance Objective		17.6		17.2	16.8	16.	5 16.2

1. Section Number: Form12_Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2007
Field Note:
2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

FORM 12 TRACKING HEALTH OUTCOME MEASURES [SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)] STATE: NE

Form Level Notes for Form 12

CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS STATE: NE 1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate. 3 2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups. 1 3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process. 2 4. Family members are involved in service training of CSHCN staff and providers. 3 5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member). 2 6. Family members of diverse cultures are involved in all of the above activities. 2 Total Score: 13 Rating Key 0 = Not Met 1 = Partially Met 2 = Mostly Met 1 = Partially Met 2 = Mostly Met 3 = Completely Met

FORM NOTES FOR FORM 13
None

FIELD LEVEL NOTES

FORM 14 LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: NE FY: 2011

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase ,list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

- 1. Increase the prevalence of the MCH/CSHCN population who are physically active, eating healthy, and are at a healthy weight.
- 2. Improve the reproductive health of youth and women by decreasing the rates of STD's and unintended pregnancies.
- 3. Reduce the impact of poverty on infants/children including food insecurity.
- 4. Reduce the health disparities gap in infant health status and outcomes.
- 5. Increase access to oral health care for children and CSHCN.
- 6. Reduce the rates of abuse and neglect of infants and CSHCN.
- 7. Reduce alcohol use and binge drinking among youth.
- 8. Increase quality of and access to perinatal health services, including pre/interconception health care, prenatal care, labor and delivery services, and postpartum care.
- 9. Increase the prevalence of infants who breastfeed exclusively through six months of age.
- 10. Increase access to Medical Homes for CSHCN particularly for those with functional limitations.

FORM NOTES FOR FORM 14
None

FIELD LEVEL NOTES

FORM 15 TECHNICAL ASSISTANCE(TA) REQUEST

STATE: NE APPLICATION YEAR: 2011

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	Other If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: N/A	MCHB consultation on budgeting and reporting requirements as they relate to lifecourse and social determinants frameworks.	Current budgeting and reporting requirements difficult to comply with in an era of changing perspectives	MCHB, and perhaps AMCHP
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

measure number here:		
If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		
If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		

FORM NOTES FOR FORM 15
None

FIELD LEVEL NOTES

FORM 16 STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET STATE: NE

SP(Reporting Year) #____

PERFORMANCE MEASURE: Percent women (18-44) with healthy weight (BMI)

STATUS:

GOAL Reduce overweight and obesity for Nebraska's women, youth, and children

DEFINITION

Numerator:

The estimated percent (weighted data set)of women 18-44 in the state who reported a BMI less than 25 during the

reporting period.

Denominator:

The estimated number (weighted data set)of women in the state who are age 18-44 in the reporting period.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Objective 19-01 Healthly Weight in Adults; 60%

DATA SOURCES AND DATA ISSUES The Nebraska Behavior Risk Factor Surveillance System (BRFSS) will provide state level data annually. BRFSS surveys

adults 18 and older. Due to data limitations women age 18-44 are a proxy for women of childbearing age

Nebraska women, youth, and children are heavier than the nation and HP2010 objectives. Overweight and obesity lead to **SIGNIFICANCE**

unhealthy quality of life. Consequences include poor birth outcomes, mental health problems, diabetes, hypertension, and

cardiovascular disease.

SP(Reporting Year) #_

PERFORMANCE MEASURE: Percent of women of child-bearing age who report smoking in the last 30 days

STATUS:

GOAL To promote healthy lifestyles in women of child-bearing age

DEFINITION

Numerator:

The estimated percent(weighted data set) of women 18-44 in the state who reported smoking on the Nebraska BRFSS

Denominator:

The estimated number (weighted data set) of women in the state who are age 18-44 in the reporting period.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Objective 27-01 Cigarette Smoking Adults; 12%

The Nebraska Behavior Risk Factor Surveillance System (BRFSS) will provide state level data annually. BRFSS surveys **DATA SOURCES AND DATA ISSUES**

adults 18 and older. Due to data limitations women age 18-44 are a proxy for women of childbearing age

Healthy living among women of child-bearing age increases the chances of healthy birth outcomes, as well as the quality of SIGNIFICANCE life in women and their children. Abstinence from smoking and alcohol use, as well as healthy eating and exercise, all contribute to a healthy lifestyle.

SP(Reporting Year) #_____3

PERFORMANCE MEASURE: Percent of women age (18-44) who report mental health not good 10+ days of past 30

STATUS: Active

GOAL To begin monitoring the mental health of women in Nebraska.

DEFINITION

Numerator:

The estimated percent (weighted data set)of women 18-44 in the state who reported 10+ days during the past 30 where

mental health was not good. (depression, stress, and problems with emotions)

Denominator:

The estimated number (weighted data set)of women in the state who are age 18-44 in the reporting period.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Focus Area 18 Mental Health and Mental Disorders

The objectives that come the closest are 18-06 Mental Health Screening /Assessment with no target set and 18-09a

Treatment for recognized depression; adults with a target of 50%.

DATA SOURCES AND DATA ISSUES

The Nebraska Behavior Risk Factor Surveillance System (BRFSS) will provide state level data annually. BRFSS surveys

adults 18 and older. Due to data limitations women age 18-44 are a proxy for women of childbearing age.

SIGNIFICANCE Mental Health efects all of the MCH populations causing unknown loss of potential. Nebraska is attempting to conduct better

assessment and monitoring of mental health including perinatal depression and CSHCN.

SP(Reporting Year) #

PERFORMANCE MEASURE: Percent of teens who report use of alcohol in last 30 days

STATUS: Active

GOAL To promote healthy lifestyles among youth

DEFINITION

The estimated number of high school students in the state who reported consuming alcohol in the last 30 days during the

reporting period.

Denominator:

Numerator:

The estimated number (weighted data of high school students in the state.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 26-10a Adolescents not using alcohol or illicit drugs in past 30 days(aged 12 to 17 years.

The Youth Risk Behavior Survey is the source for this data and is administered bi-annually. A number of large, urban **DATA SOURCES AND DATA ISSUES**

schools with students in grades 9-12 chose not to participate in the YRBS. In those large schools that did not participate, a larger than expected number of students did not complete the survey. This means that these survey results for grades 9-12 provide an important description of the priority health risk behaviors of the survey participants. The total sample, however, is not truly representative of the state's grade 9-12 students because it under-represents Nebraska's urban adolescents.

Alcohol is the most commonly used drug in Nebraska among teens. Alcohol increases the likelihood of sexual activity, SIGNIFICANCE

exposing youth to STDs and HIV. Alcohol is responsible for a high percentage of teen motor vehicle accidents, and has a

strong influence on morbidity and mortality.

SP(Reporting Year) #_

PERFORMANCE MEASURE: Percent premature births (births<37 weeks)

STATUS: Active

GOAL To reduce prematurity

DEFINITION

Numerator: The number of births that occur before 37 weeks gestation in the state in the reporting period.

The total number of births in the state during the reporting year.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-11a Total preterm births; 7.6%

DATA SOURCES AND DATA ISSUES

Birth certificate data in the NHHSS Vital Records provides information on live births.

SIGNIFICANCE

Prematurity is a serious, common and costly problem that is incresing in the state. Nebraska would like to reduce pematurity in conjunction with reducing low birth weight and infant death.

SP(Reporting Year) #_

PERFORMANCE MEASURE: Rate of infant death to adolescents (age 15-17)

STATUS: Active

GOAL To reduce poor birth outcomes to adolescents

DEFINITION

Numerator:The number of infant deaths to adolescent women (age 15-17) in the state during the reporting period.

Denominator:

The number of births to adolescent women (age 15-17) in the state during the reporting period.

Units: 1000 Text: Rate

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-01c All Infant deaths (within 1 year, per 1,000); 4.5

DATA SOURCES AND DATA ISSUES

Birth certificate data linked with death certificates data is provided by NHHSS Vital Records.

SIGNIFICANCE

Infants born to teenage mothers are at higher risk of being born low birth weight and have a higher mortality rate. Reducing

Infant mortality remains a high priroity.

SP(Reporting Year) #_____7

PERFORMANCE MEASURE: Incidence of confirmed SIDS cases (per 1,000 live births) among African American and Native American infants

STATUS: Active

GOAL To further reduce infant deaths in Nebraska due to SIDS

DEFINITION

Numerator:

Number of investigated and confirmed cases of SIDS deaths among African American and Native American infants

(combined)

Denominator:

Number of live births among African American and Native American infants (combined)

Units: 1000 Text: Rate

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-01h SIDS Deaths; 0.25/1,000

DATA SOURCES AND DATA ISSUES

Birth certificate data in NDHHS vital records provide information on live births among infants by racial/ethnic background. Because numbers are very small for this measure, a 5-year average is used to provide indicator data. Data collected by Nebraska Child Death Review Team is used to determine the number of investigated and confirmed cases of SIDS deaths among all infants, and is available by racial/ethnic background. It is important to note that child death investigations in rural and small urban counties in the state may be inconsistent with investigations in large urban counties. Individual law enforcement investigators in Lincoln and Omaha have participated in numerous child death scene investigations, whereas

their colleagus in smaller communities may not have encountered one in many years.

SIGNIFICANCE

While the incidence of SIDS in Nebraska has decreased by over 50% since the inception of the "Back To Sleep" campaign in 1994, the rate of SIDS deaths among African American and Native American infants in the state still remains over three

times that of white infants .

SP(Reporting Year) #_

PERFORMANCE MEASURE: The percent of African American women beginning prenatal care during the first trimester.

STATUS: Active

GOAL To improve the birth outcomes of African American women.

DEFINITION

Numerator:Number of African American beginning prenatal care during the first trimester

Denominator:

Number of African American women giving birth

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-06a Prenatal care beginning in the first trimester; 90%

DATA SOURCES AND DATA ISSUES

Nebraska Vital Statistics

SIGNIFICANCE

Early entry into prenatal care results in improved birth outcomes.

SP(Reporting Year) #_

PERFORMANCE MEASURE: Hospitalization for unintentional injuries (per 1,000) for children and adolescents

STATUS: Active

GOAL Reduce unintentional injuries in the state

DEFINITION

Numerator:Number of hospital discharges for unintentional injuries (non fatal inpatient and outpatient) for the ages 1-19 during the

reporting year

Denominator:

Number of children and adolescents age 1-19 in the state during the reporting year.

Units: 1000 Text: Rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Hospital Discharge data is generally provided in the fall after the annual report is due.

SIGNIFICANCE

Unintentional Injuries are a leading casue of hospitalization and death for these age groups. Therefore, greatly affecting quality of life for children, youth and thier families.

SP(Reporting Year) # 10

PERFORMANCE MEASURE: Hospitalization for intentional injuries (per 1,000) for children and adolescents (age 1-19)

STATUS: Active

GOAL Reduce rates of child abuse, neglect, and intentional injuries of children

DEFINITION

Numerator:Number of hospital discharges for unintentional injuries (non fatal inpatient and outpatient) for the ages 1-19 during the

reporting year

Denominator:

Number of children age 1-19 in the state during the reporting year.

Units: 1000 Text: Rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES Hospital Discharge data is generally provided in the fall after the annual report is due.

SIGNIFICANCE Child abuse cases reported and substantiated are increasing in Nebraska. Violent and sexual abuse scars for life.

FORM 17

HEALTH SYSTEMS CAPACITY INDICATORS FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA STATE: NE

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

			Annual Indicator Da	<u>ata</u>	
	2005	2006	2007	2008	2009
Annual Indicator	21.8	15.2	17.3	12.2	
Numerator	219	194	224	164	
Denominator	100,490	127,665	129,796	134,717	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)	! 				
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

Section Number: Form17_Health Systems Capacity Indicator #01 Field Name: HSC01

Row Name: Column Name: Year: 2009 Field Note:

Hospital Discharge Data will be available in October 2010.

2. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01 **Row Name:** Column Name: Year: 2008 Field Note:

2008 HDD data is released in October of 2009.

3. Section Number: Form17_Health Systems Capacity Indicator #01 Field Name: HSC01

Row Name: Column Name: Year: 2007 Field Note:

2007 HDD data is released in October of 2008.

IEALTH SYSTEMS CAPACITY MEASURE # 02 he percent Medicaid enrollees whose age is less than one year during	ng the reporting year	who received at leas	st one initial periodic s	screen.	
	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	98.7	98.8	98.3	98.4	97.4
Numerator	12,575	12,933	13,277	13,402	13,284
Denominator	12,743	13,094	13,510	13,625	13,641
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX., Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 03 The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	86.6	87.7	84.7	85.9	64.0
Numerator	862	876	866	972	438
Denominator	995	999	1,023	1,131	684
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)				Final	Final
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #03

Field Name: HSC03 Row Name: Column Name: Year: 2009 Field Note:

Staff recognizes issue and looking into the significatn drop.

2. Section Number: Form17_Health Systems Capacity Indicator #03

Field Name: HSC03 **Row Name:** Column Name: Year: 2007 Field Note:

Medicaid was asked to verify and interrupt the drop. Staff stated 2003-2005 should have been reported 82.9, 86.6, 86.6%.

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index

			Annual Indicator Da	ata	
	2005	2006	2007	2008	2009
Annual Indicator	63.0	66.4	72.5	72.5	74.5
Numerator	16,429	17,712	18,916	19,027	19,403
Denominator	26,085	26,659	26,096	26,244	26,052
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #04 Field Name: HSC04

Field Name: HSC04 Row Name: Column Name: Year: 2007 Field Note:

Out of state resident births are not yet in the data file (1000+ births). Over 2% of the data for this PM is missing/unknown.

HEALTH SYSTEMS CAPACITY MEASURE # 07A					
Percent of potentially Medicaid-eligible children who have received a	service paid by the N	Medicaid Program.			
	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	96.8	96.9	96.9	97.0	97.1
Numerator	153,502	154,580	155,320	159,496	166,459
Denominator	158,500	159,580	160,320	164,496	171,459
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 07B					
The percent of EPSDT eligible children aged 6 through 9 years who h	nave received any de	ental services during t	the year.		
	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	61.3	61.7	63.6	64.2	65.6
Numerator	18,869	19,384	20,265	20,948	22,709
Denominator	30,763	31,427	31,870	32,633	34,629
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08 The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program. **Annual Indicator Data** 2005 2006 2007 2008 2009 32.6 36.5 37.0 35.1 35.4 **Annual Indicator** 1,234 967 1,101 1,375 1,149 Numerator 2,964 3,016 3,715 3,278 3,482 Denominator Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be (Explain data in a year note. See Guidance, Appendix IX.)

Final

Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #08

Field Name: HSC08 Row Name: Column Name: Year: 2007 Field Note:

Num = NE CONNECT number of children 15 and younger receiving services (MHCP and/or SSI-DCP)FY 2007.

Is the Data Provisional or Final?

DEN = Table 7 SS1 payments Dec, 2007 via Healthy and Ready to Work

FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #05 (MEDICAID AND NON-MEDICAID COMPARISON) STATE: NE

INDICATOR #05 Comparison of health system capacity		2.2. 20022		POPULATION				
indicators for Medicaid, non-Medicaid, and all MCH populations in the State	YEAR	DATA SOURCE	MEDICAID	NON-MEDICAID	ALL			
a) Percent of low birth weight (< 2,500 grams)	2008	Matching data files	8.5	5.5	7			
b) Infant deaths per 1,000 live births	2008	Matching data files	5.2	3.8	4.5			
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2008	Matching data files	73.7	90.7	82.8			
d) Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2008	Matching data files	58.8	72.3	65.8			

FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL) STATE: NE

INDICATOR #06 The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2009	<u>150</u>
b) Medicaid Children (Age range 1 to 5) (Age range 6 to 18) (Age range 5)	2009	133 100
c) Pregnant Women	2009	185

FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL) STATE: NE

INDICATOR #06 The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2009	200
b) Medicaid Children (Age range 1 to 18) (Age range to) (Age range to)	2009	200
c) Pregnant Women	2009	185

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

Section Number: Form18_Indicator 05

Field Name: InfantDeath

Row Name: Infant deaths per 1,000 live births

Column Name: Year: 2011 Field Note:

This match is only for infants who passed in 2008 which excludeds the infants who were born in 2007 but passed in 2008. So, the "all" catagory is smaller than the true rate.

Section Number: Form18_Indicator 05

Field Name: CareFirstTrimester

Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

Column Name: Year: 2011 Field Note:

This data is based on linked files, of which 95% of Medicaid births were matched with a birth certificate number, becasue not all Medicaid births were matched the data reported in the all category will not be the same as reported in HSCI 05C.

Section Number: Form18_Indicator 05 Field Name: AdequateCare

Row Name: Percent of pregnant women with adequate prenatal care

Column Name: Year: 2011 Field Note:

This data is based on linked files, of which 95% of Medicaid births were matched with a birth certificate number, becasue not all Medicaid births were matched the data

FORM 19 HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: NE

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Informatioin)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	2	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS Hospital discharge survey for at least 90% of in-State discharges	2	Yes
Annual birth defects surveillance system	2	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:

- 1 = No, the MCH agency does not have this ability.
 2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
 3 = Yes, the MCH agency always has this ability.

FORM 19 HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: NE

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	Yes
Other: Youth Tobacco Survey	3	Yes
Nebraska Risk and Protective Factor Student Survey	3	Yes

*Where: 1 = No

2 = Yes, the State participates but the sample size is <u>not</u> large enough for valid statewide estimates for this age group. 3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19
None

FIELD LEVEL NOTES

FORM 20 **HEALTH STATUS INDICATORS #01-#05** MULTI-YEAR DATA STATE: NE

Form Level Notes for Form 20

None

HEALTH STATUS INDICATOR MEASURE # 01A					
The percent of live births weighing less than 2,500 grams.					
			Annual Indicator Da	<u>nta</u>	
	2005	2006	2007	2008	2009
Annual Indicator	7.0	7.1	7.0	7.1	7.1
Numerator	1,793	1,910	1,894	1,909	1,923
Denominator	25,751	26,723	26,925	26,989	26,930
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Final

Field Level Notes

Section Number: Form20_Health Status Indicator #01A Field Name: HSI01A Row Name: Column Name: Year: 2007 Field Note:
Out of state resident births are not yet in the data file (400).

Out of state resident births are not yet in the data file (1000+ births).

HEALTH STATUS INDICATOR MEASURE # 01B					
The percent of live singleton births weighing less than 2,500 grams.					
			Annual Indicator Da	<u>ıta</u>	
	2005	2006	2007	2008	2009
Annual Indicator	5.2	5.4	5.2	5.3	5.4
Numerator	1,302	1,388	1,335	1,391	1,394
Denominator	24,889	25,807	25,912	26,050	25,929
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

1. Section Number: Form20_Health Status Indicator #01B Field Name: HSI01B

Row Name:
Column Name:
Year: 2007
Field Note:
Out of state resident births are not yet in the data file (1000+ births).

HEALTH STATUS INDICATOR MEASURE # 02A					
The percent of live births weighing less than 1,500 grams.					
			Annual Indicator Da	ata .	
	2005	2006	2007	2008	2009
Annual Indicator	1.2	1.2	1.3	1.2	1.2
Numerator	311	333	350	326	318
Denominator	25,751	26,723	26,925	26,989	26,930
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	Final

Section Number: Form20_Health Status Indicator #02A
 Field Name: HSI02A

Field Name: HSI0 Row Name: Column Name: Year: 2007 Field Note:

Year: 2007
Field Note:
Out of state resident births are not yet in the data file (1000+ births).

HEALTH STATUS INDICATOR MEASURE # 02B					
The percent of live singleton births weighing less than 1,500 grams.					
			Annual Indicator Da	ata	
	2005	2006	2007	2008	2009
Annual Indicator	0.9	0.9	0.9	0.9	0.9
Numerator	216	241	237	236	226
Denominator	24,889	25,807	25,912	26,050	25,929
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 03A					
The death rate per 100,000 due to unintentional injuries among children children are considered as a constant of the control o	en aged 14 years ar	nd younger.			
			Annual Indicator Da	<u>ata</u>	
	2005	2006	2007	2008	2009
Annual Indicator	8.6	8.5	6.7	7.9	5.4
Numerator	29	29	23	27	19
Denominator	338,806	339,983	341,855	343,908	349,420
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20_Health Status Indicator #03A
 Field Name: HSI03A

Field Name: HSI0 Row Name: Column Name: Year: 2007 Field Note:

Year: 2007
Field Note:
2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

HEALTH STATUS INDICATOR MEASURE # 03B					
The death rate per 100,000 for unintentional injuries among children	aged 14 years and yo	ounger due to motor	vehicle crashes.		
			Annual Indicator Da	<u>ata</u>	
	2005	2006	2007	2008	2009
Annual Indicator	5.3	3.8	4.1	1.7	3.4
Numerator	18	13	14	6	12
Denominator	338,806	339,983	341,855	343,908	349,420
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20_Health Status Indicator #03B Field Name: HSI03B

Field Name: HSIO Row Name: Column Name: Year: 2007 Field Note:

Year: 2007
Field Note:
2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

ne death rate per 100,000 from unintentional injuries due to motor v	ehicle crashes amon	g youth aged 15 thro	ugh 24 years. Annual Indicator Da	nta	
	2005	2006	2007	2008	2009
Annual Indicator	27.0	30.4	29.5	24.8	22.1
Numerator	73	81	78	65	60
Denominator	270,686	266,705	264,334	262,190	271,201
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20_Health Status Indicator #03C Field Name: HSI03C

Field Name: HSI03 Row Name: Column Name: Year: 2007 Field Note:

Year: 2007
Field Note:
2007 Death file is incomplete, missing out of state deaths and few thousand causes of death.

HEALTH STATUS INDICATOR MEASURE # 04A					
The rate per 100,000 of all nonfatal injuries among children aged 14 y	years and younger.				
			Annual Indicator Da	<u>ata</u>	
	2005	2006	2007	2008	2009
Annual Indicator	r 262.7	279.7	267.1	265.9	
Numerator	r890	951	913	929	
Denominator	r 338,806	339,983	341,855	349,420	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?	d r ==			Final	Provisional

1. Section Number: Form20_Health Status Indicator #04A Field Name: HSI04A

Field Name: HSI Row Name: Column Name: Year: 2009 Field Note:

HDD will be available in October 2010.

2. Section Number: Form20_Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2008 Field Note:

Field Note:
2008 HDD data is released in October of 2009.

3. Section Number: Form20_Health Status Indicator #04A Field Name: HSI04A

Field Name: HS Row Name: Column Name: Year: 2007 Field Note:

2007 HDD data is not available until October, 2008.

EALTH STATUS INDICATOR MEASURE # 04B The rate per 100,000 of nonfatal injuries due to motor vehicle crashes	s among children age	ed 14 years and youn	ger.		
			Annual Indicator Da	<u>nta</u>	
	2005	2006	2007	2008	2009
Annual Indicator	19.5	9.7	16.7	9.7	
Numerator	66	33	57	34	
Denominator	338,806	339,983	341,855	349,420	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20_Health Status Indicator #04B Field Name: HSI04B

Field Name: HSI0 Row Name: Column Name: Year: 2009 Field Note:

HDD will be available in October 2010.

2. Section Number: Form20_Health Status Indicator #04B Field Name: HSI04B

Field Name: HSI04B Row Name: Column Name: Year: 2008 Field Note:

Field Note:
2008 HDD data is released in October of 2009.

3. Section Number: Form20_Health Status Indicator #04B Field Name: HSI04B

Field Name: HSI Row Name: Column Name: Year: 2007 Field Note:

2007 HDD data is not available until October, 2008.

HEALTH STATUS INDICATOR MEASURE # 04C					
The rate per 100,000 of nonfatal injuries due to motor vehicle crashes	s among youth aged	15 through 24 years.			
			Annual Indicator Da	<u>nta</u>	
	2005	2006	2007	2008	2009
Annual Indicator	75.0	63.0	68.3	69.7	
Numerator	203	168	179	189	
Denominator	270,686	266,705	262,190	271,201	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20_Health Status Indicator #04C Field Name: HSI04C

Page Name: HSI04C

Field Name: HSIO Row Name: Column Name: Year: 2009 Field Note:

HDD will be available in October 2010.

2. Section Number: Form20_Health Status Indicator #04C Field Name: HSI04C

Field Name: HSI04C Row Name: Column Name: Year: 2008 Field Note:

Field Note:
2008 HDD data is released in October of 2009.

3. Section Number: Form20_Health Status Indicator #04C Field Name: HSI04C

Field Name: HSI Row Name: Column Name: Year: 2007 Field Note:

2007 HDD data is not available until October, 2008.

HEALTH STATUS INDICATOR MEASURE # 05A					
The rate per 1,000 women aged 15 through 19 years with a reported	case of chlamydia.				
			Annual Indicator Da	ata .	
	2005	2006	2007	2008	2009
Annual Indicato	21.0	23.6	21.9	24.7	21.5
Numerato	1,340	1,494	1,386	1,548	1,374
Denominato	63,809	63,225	63,223	62,618	63,873
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 05B					
The rate per 1,000 women aged 20 through 44 years with a reported	case of chlamydia.				
			Annual Indicator Da	ata .	
	2005	2006	2007	2008	2009
Annual Indicator	r 7.1	8.1	7.9	8.6	8.5
Numerator	2,163	2,374	2,296	2,465	2,441
Denominator	302,777	292,794	290,046	285,519	288,835
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Final

FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NE

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	28,791	24,932	2,230	670	897	62	0	0
Children 1 through 4	110,863	93,685	9,667	3,658	3,521	332	0	0
Children 5 through 9	128,774	111,962	9,808	3,026	3,689	289	0	0
Children 10 through 14	121,251	106,540	8,956	2,448	3,050	257	0	0
Children 15 through 19	133,346	118,426	9,097	2,599	2,928	296	0	0
Children 20 through 24	142,960	128,324	8,422	2,578	3,248	388	0	0
Children 0 through 24	665,985	583,869	48,180	14,979	17,333	1,624	0	0

HSI #06B - Demographics (Total Population) Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	24,096	4,695	0
Children 1 through 4	91,854	19,009	0
Children 5 through 9	109,861	18,913	0
Children 10 through 14	106,506	14,745	0
Children 15 through 19	120,174	13,172	0
Children 20 through 24	130,665	12,295	0
Children 0 through 24	583,156	82,829	0

HSI #07A - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and race. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	25	5	7	2	1	0	0	10
Women 15 through 17	633	340	84	29	8	0	0	172
Women 18 through 19	1,578	990	207	50	18	0	0	313
Women 20 through 34	21,621	16,822	1,355	355	519	0	0	2,570
Women 35 or older	3,074	2,391	137	34	152	0	0	360
Women of all ages	26,931	20,548	1,790	470	698	0	0	3,425

HSI #07B - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	
Women < 15	15	10	0	
Women 15 through 17	419	241	0	
Women 18 through 19	1,183	395	0	
Women 20 through 34	18,401	3,215	5	
Women 35 or older	2,640	430	4	
Women of all ages	22,658	4,291	9	

through 24

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	146	113	30	2	1	0	0	0
Children 1 through 4	38	29	6	3	0	0	0	0
Children 5 through 9	12	10	1	1	0	0	0	0
Children 10 through 14	21	19	2	0	0	0	0	0
Children 15 through 19	75	59	11_	4	1	0	0	0
Children 20 through 24	102	81	14	5	2	0	0	0
Children 0	394	311	64	15	4	0	0	0

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	140	6	0
Children 1 through 4	37	1	0
Children 5 through 9	12	0	0
Children 10 through 14	20	1	0
Children 15 through 19	74	1	0
Children 20 through 24	98	4	0
Children 0 through 24	381	13	0

HSI #09A - Demographics (Miscellaneous Data) Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	523,025	455,545	39,758	12,401	14,085	1,236	0	0	2009
Percent in household headed by single parent	24.1	0.0	0.0	0.0	0.0	0.0	0.0	24.1	2008
Percent in TANF (Grant) families	99.9	38.1	27.4	6.0	1.9	0.2	1.5	24.8	2009
Number enrolled in Medicaid	142,621	100,067	23,259	6,238	2,492	183	1,674	8,708	2009
Number enrolled in SCHIP	37,447	29,279	4,312	953	685	36	328	1,854	2009
Number living in foster home care	4,134	2,426	859	203	31	1	136	478	2009
Number enrolled in food stamp program	82,326	45,279	15,202	3,472	1,194	95	1,153	15,931	2009
Number enrolled in WIC	56,806	35,778	6,642	9,596	741	151	0	3,898	2009
Rate (per 100,000) of juvenile crime arrests	3,001.9	2,709.7	7,115.5	3,209.4	347.9	0.0	0.0	0.0	2008
Percentage of high school drop- outs (grade 9 through 12)	1.5	1.1	3.8	3.2	1.2	0.0	0.0	0.0	2009

HSI #09B - Demographics (Miscellaneous Data) Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	452,491	70,534	0	2009
Percent in household headed by single parent	0.0	0.0	24.1	2008
Percent in TANF (Grant) families	18.3	23.1	58.6	2009
Number enrolled in Medicaid	133,967	35,649	8,654	2009
Number enrolled in SCHIP	35,623	10,556	1,854	2009
Number living in foster home care	2,826	643	665	2009
Number enrolled in food stamp program	17,945	15,086	49,295	2009
Number enrolled in WIC	37,088	19,716	2	2009
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	3,001.9	2008
Percentage of high school drop-outs (grade 9 through 12)	0.0	3.3	0.0	2009

HSI #10 - Demographics (Geographic Living Area) Geographic living area for all resident children aged 0 through 19 years old. (Demographics)

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	270,984
Living in urban areas	395,096
Living in rural areas	82,113
Living in frontier areas	45,816
Total - all children 0 through 19	523,025

Note: The Total will be determined by adding reported numbers for urban, rural and frontier areas.

HSI #11 - Demographics (Poverty Levels) Percent of the State population at various levels of the federal poverty level. (Demographics)

POVERTY LEVELS	TOTAL	
Total Population	1,174,000.0	
Percent Below: 50% of poverty	6.4	
100% of poverty	9.5	
200% of poverty	27.0	

HSI #12 - Demographi	ics (Poverty Levels) Percent of the State	population aged 0 through 19 at various levels of the federal poverty level. (Demographics)
Reporting Year: 2008	Is this data from a State Projection? No	Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	496,000.0
Percent Below: 50% of poverty	
100% of poverty	8.8
200% of poverty	21.3

FORM NOTES FOR FORM 21

FIELD LEVEL NOTES

1. Section Number: Form21_Indicator 09A

Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent

Column Name: Year: 2011 Field Note: No source of data

Section Number: Form21_Indicator 09B Field Name: HSIEthnicity_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name: Year: 2011 Field Note: No source of data

Section Number: Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name: Year: 2011 Field Note:

Data is not collected by ethnicity

FORM 11 TRACKING PERFORMANCE MEASURES [SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)] STATE: NE

Form Level Notes for Form 11

	An	nual Objective and F	<u>'erformance Data</u>	
2005	2006	2007	2008	2009
e				
r				
r				
r				
е				
?				
	An	nual Objective and F	erformance Data	
2010	2011	2012	2013	2014
e				
While you ma Period 2011-			formance Measures	for the Needs Assessmer
	e	Ani 2010 2011 e or While you may enter preliminary of Period 2011-2015, this is not requi	Annual Objective and P 2010 2011 2012 e While you may enter preliminary objectives for State Per Period 2011-2015, this is not required until next year.	Annual Objective and Performance Data 2010 2011 2012 2013 e Of While you may enter preliminary objectives for State Performance Measures of Period 2011-2015, this is not required until next year.

Field Level Notes

STATE PERFORMANCE MEASURE # 2 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015						
The percentage of live births that were intended at the time of concept	tion.			_		
	2005		bjective and Perform		2000	
	2005	2006	2007	2008	2009	
Annual Performance Objective						
Annual Indicator						
Numerator						
Denominator						
Data Source						
Is the Data Provisional or Final?						
		Annual Ol	bjective and Perforn	nance Data		
	2010	2011	2012	2013	2014	
Annual Performance Objective						
Annual Indicator			- f Ct-t- Df	M	Niceda Accessor	
Numerator	while you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.					
Denominator	,		•			

STATE PERFORMANCE MEASURE # 3 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015							
The percent of children living in poverty who have health insurance.							
	Annual Objective and Performance Data						
	2005	2006	2007	2008	2009		
Annual Performance Objective							
Annual Indicator							
Numerator							
Denominator							
Data Source							
Is the Data Provisional or Final?							
	Annual Objective and Performance Data						
	2010	2011	2012	2013	2014		
Annual Performance Objective							
Annual Indicator		or proliminary objective	as for State Berforms	noo Mooguroo for the	Nooda Assassment		
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.						
Denominator		·					

STATE PERFORMANCE MEASURE # 4 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015							
The preterm birth disparity (ratio) between African American and Caucasian infants.							
		<u>A</u> 1	nnual Objective and Perf	ormance Data			
	2005	2006	2007	2008	2009		
Annual Performance Objective							
Annual Indicator							
Numerator							
Denominator							
Data Source							
Is the Data Provisional or Final?							
		•	and Oliverian and Barri	D			
			nnual Objective and Perf		••••		
	2010	2011	2012	2013	2014		
Annual Performance Objective							
Annual Indicator							
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessme Period 2011-2015, this is not required until next year.						
Denominator							

STATE PERFORMANCE MEASURE # 5 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015						
The percent of young children (1-5) who have excellent/very good der	ntal health.	_				
	Annual Objective and Performance Data					
	2005	2006	2007	2008	2009	
Annual Performance Objective		_				
Annual Indicator		_				
Numerator		_				
Denominator		_				
Data Source						
Is the Data Provisional or Final?						
	Annual Objective and Performance Data					
	2010	2011	2012	2013	2014	
Annual Performance Objective						
Annual Indicator						
Numerator			bjectives for State Per red until next year.	formance Measures	for the Needs Assessment	
Denominator		-,				

STATE PERFORMANCE MEASURE # 6 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015							
The rate per 1,000 infants of substantiated reports of child abuse and neglect.							
	Annual Objective and Performance Data						
	2005	2006	2007	2008	2009		
Annual Performance Objective							
Annual Indicator							
Numerator							
Denominator							
Data Source							
Is the Data Provisional or Final?							
				_			
		Annual Objective and Performance Data					
	2010	2011	2012	2013	2014		
Annual Performance Objective							
Annual Indicator	NA/Initia		f Otata Danfarra		Nanda Annana		
Numerator	Period 2011-2015, this is not required until next year.						
Denominator							

STATE PERFORMANCE MEASURE # 7 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015							
Percent of teens who report use of alcohol in last 30 days							
		<u>An</u>	nual Objective and Pe	erformance Data			
	2005	2006	2007	2008	2009		
Annual Performance Objective				_			
Annual Indicator		_		_			
Numerator				_			
Denominator							
Data Source							
Is the Data Provisional or Final?							
	Annual Objective and Performance Data						
	2010	2011	2012	2013	2014		
Annual Performance Objective		_		_			
Annual Indicator	While you may a	ntor proliminary	higativas for State Borf	ormanaa Maaauraa	for the Needs Assessment		
	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.						
Denominator			•				

FORM 12 TRACKING HEALTH OUTCOME MEASURES [SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)] STATE: NE

Form Level Notes for Form 12

FORM 16 STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET STATE: NE

SP(New for Needs Assessment cycle 2011-2015) #

PERFORMANCE MEASURE: Percent women (18-44) with healthy weight (BMI)

STATUS:

GOAL Reduce overweight and obesity for Nebraska's women, youth, and children

DEFINITION

Numerator:

The estimated percent (weighted data set)of women 18-44 in the state who reported a BMI less than 25 during the

reporting period.

Denominator:

The estimated number (weighted data set)of women in the state who are age 18-44 in the reporting period.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Objective 19-01 Healthly Weight in Adults; 60%

DATA SOURCES AND DATA ISSUES The Nebraska Behavior Risk Factor Surveillance System (BRFSS) will provide state level data annually. BRFSS surveys

adults 18 and older. Due to data limitations women age 18-44 are a proxy for women of childbearing age

Nebraska women, youth, and children are heavier than the nation and HP2010 objectives. Overweight and obesity lead to **SIGNIFICANCE**

unhealthy quality of life. Consequences include poor birth outcomes, mental health problems, diabetes, hypertension, and

cardiovascular disease.

SP(New for Needs Assessment cycle 2011-2015) #

PERFORMANCE MEASURE: The percentage of live births that were intended at the time of conception.

STATUS:

GOAL Reduce the rate of unitended pregnancies.

DEFINITION

Numerator:

The estimated number of women who reported wanting to become pregnant sooner or then just before they became

pregnant.

Denominator: The number of live births in the calander year.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Objective 09-01 Intended Pregnancy; 70%

Nebraska Pregnancy Risk Assessment Monnitoring System (NE PRAMS) will provide state level data annually. PRAMS is a self-report stratified survey of 10% of all live births. The data lags by 2 years (reporting 2008 in 2010) this is not expected to **DATA SOURCES AND DATA ISSUES**

An intended pregnancy is a indicator of healthy reporducitve life. An unintended pregnancy can have a negative impact on the mother's physical, emotional or economic well-being. Since an unintended pregnancy can impact a woman's choice to adopt healthy prenatal behaviors, the risk of experiencing a poor birth outcome such as prematurity may be greater. These SIGNIFICANCE

in turn affect the baby and the family.

SP(New for Needs Assessment cycle 2011-2015) # 3

PERFORMANCE MEASURE: The percent of children living in poverty who have health insurance.

STATUS: Active

GOAL To reduce the impact of poverty on infant and childhood health.

DEFINITION

Numerator:

The number of children age 0-9 who live in households with income below 100% of the Federal Poverty Level who are

uninsured.

Denominator:

The number of children age 0-9 who live in households with income below 100% of the Federal Poverty Level.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 01-01; Health Insurance Coverage 100%

DATA SOURCES AND DATA ISSUES

SIGNIFICANCE

The Current Population Survey Annual Social and Economic Supplement, Census Bureau

Infants and children living in poverty do not reach development milestones, have higher rates of emotional and behavior problems, increased incidence of learning disabilities, decreased ability to problem solve, higher disease rates due to less healthy lifestyles, asthma, and obesity that affect them later in life. Poverty impedes an infant's ability to learn and contribute to social, emotional, and behavioral problems.3 Poverty can also contribute to poor health and mental health. Risks are greatest for children who experience poverty when they are young and/or generational poverty.

SP(New for Needs Assessment cycle 2011-2015) #_____4

PERFORMANCE MEASURE: The preterm birth disparity (ratio) between African American and Caucasian infants.

STATUS: Activ

GOAL To reduce the disparity in infant health status and outcomes.

DEFINITION

Numerator:

The preterm birth rate among African American births.

Denominator:

The preterm birth rate among Caucasian births.

Units: 1 Text: Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Nebraska Vital Statistics

SIGNIFICANCE

Unequal health status is evident at birth and is documented in nearly every indicator of infant health determinants, health status, and health outcomes. Starting life at a disadvantage compounds the challenges to achieve equal results throughout life and may result in intractable, lifelong disparity. The disparity indicated in birth outcomes and during the first year of life are compelling enough to not limit the look at disparities to just the infant population, but to prioritize it within a life course approach.

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5 SP(New for Needs Assessment cycle 2011-2015) #

PERFORMANCE MEASURE: The percent of young children (1-5) who have excellent/very good dental health.

STATUS: Active

GOAL Increase access to preventative dental health care for children and children with special health care needs.

DEFINITION

Numerator: The number of young children (1-5) whose parents report excellent/very good dental health.

Denominator:

The number of young children (1-5).

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

National Survey of Children's Health.

SIGNIFICANCE

Poor oral health for children relates to a number of problems including chronic pain, inadequate nutrition, impaired speech development, decreased school performance, poor social relationships, and even rare, but severe infectious diseases. According to the Maternal and Child Oral Health Resource Center, an estimated 51 million school hours are lost nationwide per year because of dental-related illness.

SP(New for Needs Assessment cycle 2011-2015) #

The rate per 1,000 infants of substantiated reports of child abuse and neglect.

PERFORMANCE MEASURE:

STATUS: Active

GOAL Reduce the incidence of child abuse and neglect among infants and children with special health care needs.

DEFINITION

Numerator: The number of substantiated reports of child abuse and neglect among infants in a calendar year.

Denominator:

6

The estimated number of infants.

Units: 1000 Text: Rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Child Abuse and Neglect (CAN) data is information that is entered in Nebraksa's Statewide Automated Child Welfare Information System (SACWIS) also known as N-FOCUS (Nebraska Family Online Client User System). The data is extracted annually and is dependent upon the accuracy of the data entered in NFOCUS at the time the data is extracted.

Adverse childhood experiences such as child maltreatment have significant life long consequences. Impacts include **SIGNIFICANCE**

disruption to growth and development, depression, higher incidence of illness and chronic diseases as well as a shortened

lifespan. Infants and CSHCN are more vulnerable to child abuse and neglect.

SP(New for Needs Assessment cycle 2011-2015) #______7

PERFORMANCE MEASURE: Percent of teens who report use of alcohol in last 30 days

STATUS: Active

GOAL To promote healthy lifestyles among youth

DEFINITION

Numerator:

The estimated number of high school students in the state who reported consuming alcohol in the last 30 days during the

reporting period.

Denominator:

The estimated number (weighted data of high school students in the state.

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 26-10a

Adolescents not using alcohol or illicit drugs in past 30 days(aged 12 to 17 years.

DATA SOURCES AND DATA ISSUES

The Youth Risk Behavior Survey is the source for this data and is administered bi-annually. A number of large, urban

schools with students in grades 9-12 chose not to participate in the YRBS. In those large schools that did not participate, a larger than expected number of students did not complete the survey. This means that these survey results for grades 9-12 provide an important description of the priority health risk behaviors of the survey participants. The total sample, however, is not truly representative of the state's grade 9-12 students because it under-represents Nebraska's urban adolescents.

SIGNIFICANCE Alcohol is the most commonly used drug in Nebraska among teens. Alcohol increases the likelihood of sexual activity,

exposing youth to STDs and HIV. Alcohol is responsible for a high percentage of teen motor vehicle accidents, and has a

strong influence on morbidity and mortality.